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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/586,616			ing Date 01/2008	To be Mailed	
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY	
	FOR	,	IUMBER FI	LED NUI	JMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		]	N/A		
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A		N/A		]	N/A		
	EXAMINATION FE (37 CFR 1,16(o), (p),		N/A		N/A		N/A		]	N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 = *			1	x \$ = 1		OR	x s =		
IND (37	EPENDENT CLAIN CFR 1.16(h))	IS	minus 3 = *			ı	X \$ =		1	X S =		
☐APPLICATION SIZE FEE (37 CFR 1.16(s))  If the specification and d sheets of paper, the app is \$250 (\$125 for small e additional 50 sheets or if 35 U.S.C. 41(a)(1)(G) ar					n size fee due for each n thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						]			]			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		]	TOTAL		
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR		ER THAN ALL ENTITY	
AMENDMENT	11/01/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	• 7	Minus	** 20	= 0	]	x s =		OR	X \$60=	0	
	Independent (37 CFR 1.16(h))	• 1	Minus	3	- 0	1	X \$ =		OR	X \$250=	0	
	Application Size Fee (37 CFR 1.16(s))											
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					П			OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
ENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16(i))		Minus		=	ı	X \$ =		OR	x s =		
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밑	Application Size Fee (37 CFR 1.16(s))					ı			l			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					l			OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If	*! If the entry in column 1 is isses than the entry in column 2, write "0" in column 3. Legal Instrument Examiner:  "If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".  The Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".  The Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3".  The Highest Number Previously Paid For "1" in the information is sometiment of both and a paid in the form a benefit with the paid which is no flip (and but the ISETO to											

This collection of information is required by 37 CFR 11.6. The information is required to delian or retain a benefit by the public which is to file (and by the USE) process) an application. Confidentially 39 cycered by 38 cycered by 38 CFR 11.6. This collection is estimated to take 12 nimulates to complete, including gathering, preparing, and submitting the completed application form to the USE 17.0. Time will wary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the CFR Information CFR U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 22319.4. Box D.O. NOT ISSO, D.O. NOT ISSO, J.O. SAT 1450, Alexandrius, VA 22319.4. Box D.O. NOT ISSO, J.O. SAT 1450, Alexandrius, VA 22319.4. Box D.O. NOT ISSO, J.O. SAT 1450, Alexandrius, VA 22319.4. Box D.O. NOT ISSO, J.O. SAT 1450, Alexandrius, VA 22319.4. Box D.O. NOT ISSO, J.O. SAT 1450, Alexandrius, VA 22319.4. Box D.O. NOT ISSO, J.O. SAT 1450, Alexandrius, VA 22319.4. Box D.O. NOT ISSO, J.O. SAT 1450, Alexandrius, VA 22319.4. Box D.O. NOT ISSO, J.O. SAT 1450, Alexandrius, VA 22319.4. Box D.O. NOT ISSO, J.O. SAT 1450, Alexandrius, VA 22319.4. Box D.O. NOT ISSO, J.O. SAT 1450, Alexandrius, VA 22319.4. Box D.O. NOT ISSO, J.O. NOT ISSO, J.